

# Emerging Issues Paper: Social impacts and responses related to COVID-19 in low- and middle-income countries

### **Key Findings**

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#### K4D

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#### Introduction

COVID-19 and responses to it have triggered a global crisis that extends beyond health impacts to all aspects of life.

The impacts are harshest for those groups who were already marginalised and excluded before the crisis, and pre-existing inequalities are being exacerbated and deepened.

This presentation highlights the key findings of an Emerging Issues paper looking at the emerging evidence of the social impacts of COVID-19 and the response in low- and middle-income countries, structured around the five social development technical competencies.

The evidence available is a mixture of quantitative and qualitative research of the situation on the ground and predictions based on various models. The literature available also includes policy papers based on experience with previous epidemics and work being carried out in the relevant areas prior to the outbreak of COVID-19.

# SOCIAL IMPACTS OF COVID-79

POOR AND NEAR POOR AT RISK OF EXTREME POVERTY

Up to **395 million more** will fall into extreme poverty in 2020







#### **Increased poverty:**

- The global economic shock and steep recessions are causing potentially hundreds of millions to fall (back) into poverty (World Bank, 2020a; Hazard, 2020; Sumner et al., 2020).
- Many of those who escaped extreme poverty in recent years are still vulnerable to falling back into it, and many live very close to the poverty line in urban and rural areas, with little ability to withstand the economic shock of COVID-19 (World Bank, 2020a; Sumner et al., 2020; Rahman et al., 2020; Wylde et al., 2020).



#### Extreme poverty (USD 1.90 poverty line) estimates :

 range from 71 million to 395 million more people falling into extreme poverty, most of whom are in Sub-Saharan Africa (Mahler et al., 2020; Sumner et al., 2020).

#### USD 3.30 poverty line estimates:

 range from 176 million to 576 million more people falling into poverty, most of whom are in South Asia (Mahler et al., 2020; Sumner et al., 2020).



#### Loss of life and livelihoods

- Poor people and marginalised communities have been the hardest hit in terms of vulnerability to the virus and its economic consequences (Alston, 2020; UN, 2020a).
- Measures taken in response to epidemics can have severe consequences for people's livelihoods, incomes, and access to food and essential services, especially for poorer people, women, and those in the informal sector, and they may turn to negative coping mechanisms (UNAIDS, 2020; UN Women, 2020c; Global Protection Cluster, 2020; Hazard, 2020).

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### Poverty and vulnerability impacts

Ethiopia: 55% of household's income reduced or disappeared – survey of 3,249 households (Wieser et al., 2020)

**Kenya**: 84% complete or partial loss of income – survey of five informal settlements (Population Council, 2020)

**Bangladesh**: income drop of 75% in urban slums and 62% in rural areas – survey of 5,471 households (Rahman et al., 2020)

**Nepal**: 3 in 10 lost some income – survey of 4,416 households (Regmi et al., 2020)

**Jordan**: 56.8% lost entire income – survey of 12,083 respondents (UNDP, 2020)

Iraq: 89% of internally displaced persons lost employment or livelihoods (Global Protection Cluster, 2020)

**Senegal**: 86.8% income was below average – survey of 1,023 people (Le Nestour et al., 2020)



## Increased food insecurity and reduced spending on essentials

- The number of people facing acute food insecurity could double to more than 260 million in 2020, with serious consequences for health (World Bank, 2020a; UN, 2020d).
- Women are more likely than men to suffer from food insecurity and to forgo spending on other essentials (Population Council, 2020).



# Preparedness, response/mitigation, resilience and recovery measures

- Balance virus containment and risks to people's livelihoods (World Bank, 2020b; Jones, S., et al., 2020; Dercerf et al., 2020).
- Make the protection and creation of jobs and incomes of the most vulnerable workers central to the recovery effort (UN, 2020d; World Bank, 2020b; Cochran et al., 2020).
- Maintain essential food and nutrition services, and provide support to cover financial obligations for basic utilities and rent, etc. (UN, 2020d; Cochran et al., 2020; Staab et al., 2020).
- Evidence from past crises shows that expansionary fiscal and social protection responses have helped to reduce poverty, while austerity measures have had detrimental impacts (Tirivayi et al., 2020).

# SOCIAL IMPACTS OF COVID-19 IN LOW- & MIDDLE-INCOME COUNTRIES

#### MARGINALISED GROUPS MOST AFFECTED

Existing inequalities have been exposed and worsened by COVID-19





Existing inequalities have been exposed and worsened, with those already marginalised and vulnerable the most affected by COVID-19, either directly or indirectly through the responses to it (UNAIDS, 2020; UN, 2020d).

#### Increased stigmatisation

- COVID-19 has resulted in the stigmatisation of those affected by COVID-19 (survivors and their families and healthcare workers) and those who become associated with it (generally already vulnerable and marginalised social groups, such as ethnic and religious minorities) (IFRC et al., 2020; UNESCO, 2020).
- This stigmatisation has led to discriminatory behaviour, social exclusion, economic marginalisation, and violence, as well as further restrictions on access to essential support and services (UNAIDS, 2020; Bishop, 2020).

#### K4D

# Social policy impacts: Focusing on vulnerable groups

#### People with disabilities' increased vulnerability

People with disabilities are especially at risk of catching and dying from COVID-19, and the crisis response has exacerbated the barriers they face and disproportionally exposed them to loss of income, food insecurity, and violence (HI, 2020; Goyal et al., 2020; Webster, 2020; i2i, 2020).

#### Older people's increased vulnerability

Older people are very vulnerable to dying of COVID-19, and the responses have often neglected them and left them isolated, impoverished, and not receiving the care and support they had before (UN, 2020c).



#### Children's increased vulnerability

Children, especially children from marginalised and excluded groups, are severely affected during the COVID-19 pandemic by school closures, protection risks (including violence, female genital mutilation, child marriage, child labour), lack of routine healthcare, malnutrition, and poverty; jeopardising their development (Hazard, 2020; Wieser et al., 2020).

#### Young people's increased vulnerability

Many young people risk being left behind in education, economic opportunities, and health and wellbeing, due to the disruptions caused by the COVID-19 response (UNDESA, 2020b; Jones, N., et al., 2002b; Farheen Ria et al., 2020; Hamad et al., 2020).



- Globally, over 1 billion students and youth are affected by school and university closures due to the COVID-19 outbreak (UNESCO, n.d.).
- Up to 86 million more children could be pushed into household poverty (UNICEF, 2020b).
- Up to 85 million more girls and boys worldwide are likely to be exposed to physical, sexual and/or emotional violence over the next three months as a result of COVID-19 quarantines (World Vision, 2020).



#### Informal workers' increased vulnerability

- 1.6 billion informal workers are at risk of losing their livelihoods as a result of COVID-19 restrictions (ILO, 2020a).
- Many have little or no access to social protection to protect them from the economic shock (Devereux et al., 2020; UN, 2020d).
- They are vulnerable to catching COVID-19 due to the conditions they live and work in (WIEGO, 2020).



#### Migrants' increased vulnerability

- Migrant workers are more exposed to the loss of employment and wages during the economic crisis caused by COVID-19, and those in irregular positions often have limited or no access to social protection (UN, 2020b).
- Families depending on their remittances are also hit hard by the loss of migrant workers' wages (UN, 2020b; Wiesner et al., 2020).

#### Forcibly displaced population's increased vulnerability

 Refugees and internally displaced persons are at risk of catching COVID-19 due to their living conditions. Many have lost their livelihoods in the informal sector, and protection risks and rights violations are also a concern (Hazard, 2020; UN, 2020b; Kebede et al., 2020).



#### Racial and ethnic minorities' increased vulnerability

 Racial and ethnic minorities are disproportionally dying of COVID-19 as a result of structural inequalities, and are facing increased abuse and discrimination, loss of livelihoods, and lack of access to education (Bachelet, 2020b; OHCHR, 2020b).

#### Indigenous groups' increased vulnerability

 Indigenous groups risk loss of both life and livelihoods due to their exclusion and reliance on the informal sector (UNDESA, 2020a; OHCHR, 2020).



#### LGBTQI people's increased vulnerability

 COVID-19 has amplified the violence, exclusion, and deprivation already experienced by LGBTQI people across the world (Bishop, 2020; Edgell et al., 2020).

#### Prisoners' increased vulnerability

 Prisoners in overcrowded prisons are particularly vulnerable to disease outbreaks, and the loss of visitors due to COVID-19 precautions negatively affects their mental health (UNAIDS, 2020; PRI, 2020).



# Preparedness, response/mitigation, resilience and recovery measures

- Analyse who is marginalised and at risk, and collect, analyse and monitor disaggregated data (UNFPA, 2020; HI, 2020).
- Combat and prevent the creation of stigmatising views or attitudes (UNAIDS, 2020).
- Ensure that COVID-19 responses are inclusive, especially of groups that are particularly affected (UN, 2020b; HI, 2020).
- Responses should be human rights based and involve the groups most affected in the decision-making, governance, and monitoring of the response (UNAIDS, 2020; UN, 2020b).
- In the long term, countries need to invest in protecting health, economic, and social rights as key defences against global epidemics and their fallout (UNAIDS, 2020; UN, 2020a).

# SOCIAL IMPACTS OF COVID-79 IN LOW- & MIDDLE-INCOME COUNTRIES

# WOMEN & GIRLS MOST AFFECTED

COVID-19 has the potential to reverse decades of progress in their development and rights





#### Reversal in gender equality progress

 COVID-19 has the potential to reverse progress in women's and girls' development and rights, and decades of progress towards gender equality and women's economic empowerment (UNFPA, 2020; Grown & Sanchez-Paramo, 2020; Rafaeli & Hutchinson, 2020).



#### Increase in gender-based violence

- Reports in almost every country worldwide indicate big increases in gender-based violence since the outbreak of COVID-19 and the measures taken to contain it (UN Women, 2020a).
- 31 million additional cases of gender-based violence can be expected to occur if lockdowns continue for at least 6 months (UNFPA, 2020).
- Access to gender-based violence services is constrained by the lockdowns, social distancing, and the diversion of resources (UNFPA, 2020; Klugman, 2020).
- There is a risk of sexual exploitation and abuse and sexual harassment in the response to COVID-19, especially for those already disadvantaged in their communities (SRSH, 2020; Peterman et al., 2020; Global Protection Cluster, 2020).



#### Increase in cases of female genital mutilation

 School closures, financial insecurity, and disruption to programmes to prevent female genital mutilation may result in an additional 2 million cases over the next decade that could have been averted (UNFPA, 2020; Reuters, 2020; Hodal, 2020).

#### Increase in cases of child marriage

 An additional 13 million child marriages may take place between 2020 and 2030 that could otherwise have been avoided, including possibly at least 4 million more in the next two years, as a result of school closures, financial insecurity, breakdowns in social networks, and unintended pregnancies (Girls Not Brides, 2020; World Vision, 2020; UNFPA, 2020; Global Protection Cluster, 2020).



#### Reduced access to sexual and reproductive health services

- Women and girls are finding it increasingly difficult to access lifesaving sexual and reproductive services, as services are sidelined, resources are diverted, health workers lack personal protective equipment, and women can't travel to clinics or stay away for fear of contracting COVID-19 (UNFPA, 2020; Haegeman & Vlahakis, 2020; Klugman, 2020; Rafaeli & Hutchinson, 2020; IPPF, 2020; Church et al., 2020).
- Safe abortion services are at particular risk during the pandemic, with COVID-19 being used as a deliberate opportunity to push for a roll back of women's sexual and reproductive health rights (Mijatović, 2020; Skinner, 2020).



A 10% service disruption in sexual and reproductive health services is estimated to lead to:

- an additional 15 million unintended pregnancies,
- 28,000 maternal deaths,
- 168,000 additional newborn deaths, and
- 3.3 million unsafe abortions leading to an additional 1,000 maternal deaths (Riley et al., 2020).



#### Reduced female labour force participation

- Women are more vulnerable to losing their livelihoods due to their greater representation in sectors worst affected by the crisis, including the informal sector (ILO, 2020b; UN Women, 2020c; UNFPA, 2020; Cochran et al., 2020; BRAC, 2020).
- The dip in women's labour force participation and economic activity compared to men is likely to be prolonged (Klugman, 2020).
- Economic hardship can lead to risky behaviour, including transactional sex (Rafaeli & Hutchinson, 2020; Global Protection Cluster, 2020).
- 70% of frontline health and social care workers are women, increasing their exposure to the virus and to challenging work conditions, including attacks against them (Hazard, 2020; Rafaeli & Hutchinson, 2020; Amnesty International, 2020).



#### Reduced access to education for girls

 Gender inequality in education is likely to worsen as a result of school closures, with girls less likely to return, having less access to online learning due to the digital gender divide and needing to spend more time on care duties during school closures than boys (Rafaeli & Hutchinson, 2020; Haegeman & Vlahakis, 2020; Girls Not Brides, 2020).



#### Increased care burden

- Women's and girls' care burden has increased as a result of COVID-19, due to caring for the sick, the disruption to childcare arrangements, increased responsibilities caring for older and household members with disabilities, and socially ascribed, gendered domestic responsibilities made more difficult by COVID-19 and the response (Hazard, 2020; Klugman, 2020; Nazneen & Araujo, 2020).
- This can push them out of the workforce/education (Staab et al., 2020; Haegeman and Vlahakis, 2020).
- In some contexts, men and boys are becoming more involved in domestic tasks and childcare during lockdown, although still to a lesser extent than women (UN Women, 2020c).



#### Lack of women's participation in official response

- Despite their frontline work and the impact that COVID-19 and the response to it has on women, there has not been enough involvement of women in official COVID-19 response planning and decision-making, leading to responses that fail to account for the disproportionate impact the crisis has on them (Fuhrman & Rhodes, 2020; Freizer, 2020).
- Countries where women are at the helm have been praised for their inclusive and effective COVID-19 response efforts, although evidence is still emerging (Freizer, 2020).
- Women's groups have been active in responding to the crisis in their communities, although their regular functions have been challenged by lockdowns, social distancing, and funding constraints (De Hoop et al., 2020; Freizer, 2020).



# Preparedness, response/mitigation, resilience and recovery measures

- Centre response and recovery on human rights and gender analysis, paying particular attention to marginalised and excluded women and girls (Rafaeli & Hutchinson, 2020; Haegeman & Vlahakis, 2020).
- Gather gender-disaggregated data (Haegeman & Vlahakis, 2020).
- Enable and have women's representation in decision-making bodies of the responses at every level (Fuhrman & Rhodes, 2020; Freizer, 2020; De Hoop et al., 2020).
- Ensure the continuity of gender-based violence services and efforts to prevent harmful practices through continued support and adaption (Nazneen & Araujo, 2020; UN Women, 2020b; UNFPA, 2020; Klugman, 2020; Hazard, 2020; SHRH, 2020b).



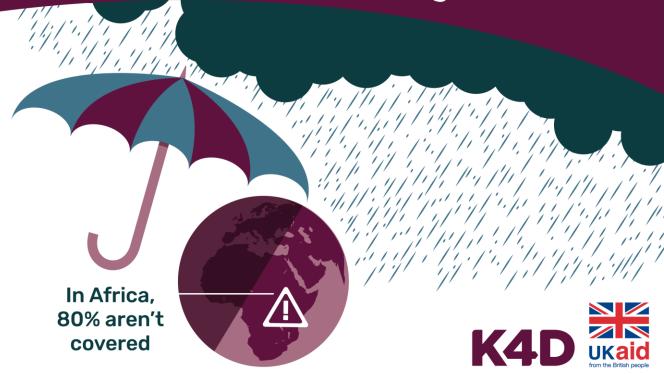
# Preparedness, response/mitigation, resilience and recovery measures

- Maintain essential health services delivery, including sexual and reproductive health services, through adaptions and women's participation (Nazneen & Araujo, 2020; Leung et al., 2020; UNFPA, 2020; Church et al., 2020).
- Make economic recovery programmes gender sensitive and targeted to the hardest-hit sectors that employ a large share of women and to women-led enterprises and businesses (Nazneen and Araujo, 2020; Cochran et al., 2020; Staab et al., 2020).
- Promote flexible work arrangements, the expansion of social protection to those with care responsibilities, the provision of childcare, and greater sharing of unpaid care and domestic work (Cochran et al., 2020; Staab et al. 2020).

# SOCIAL IMPACTS OF COVID-19 IN LOW- & MIDDLE-INCOME COUNTRIES

# NO SOCIAL PROTECTION

55% of the world have no or inadequate social protection to protect from COVID-19 shocks





### Social protection impacts

## Exacerbation of existing vulnerabilities and gaps in social protection

- Lack of access to social protection contributes to people's vulnerabilities to the impacts and economic shocks posed by COVID-19 and the response (Hazard, 2020; Devereux et al., 2020).
- Around 55% of the world's population have no or inadequate social protection, especially in Africa, where 80% aren't covered, and amongst informal sector workers, part-time workers, temporary workers, and self-employed workers (ILO & UNICEF, 2020b; Lind et al., 2020; World Bank, 2020b; ILO, 2020b).

Counties that have strong and effective social protection systems are better prepared to respond to the impacts of COVID-19 (ILO, 2020b; UN, 2020d; Dafuleya, 2020).



### Social protection immediate response

#### Coverage of new and expanded measures – as of 12 June

- 195 countries have planned, introduced, or adapted 1,024 social protection measures in response to COVID-19 by temporarily expanding the numbers eligible, topping up existing payments, creating new benefits, or combinations thereof (Gentilini et al., 2020).
- Some new programmes are including previously excluded groups, such as informal workers (Staab et al., 2020).
- Not all countries have been able to respond in this way, with Africa having the lowest levels of coverage at 2% for cash and 5% for cash and in-kind combined, and many of the most fragile countries having no measures in place (Gentilini et al., 2020).



### Social protection immediate response

#### New and expanded social protection measures

- Most of the social protection responses to COVID-19 so far are in the form of social assistance, mainly consisting of cash transfers, followed by support for financial obligations and inkind food/voucher schemes, and are often of short duration and uncoordinated in their targeting (Gentilini et al., 2020).
- Other responses include new and expanded social insurance and labour market programmes (Gentilini et al., 2020).

#### Attempts at universal social protection

 Some countries' expanded social protection programmes are almost universal, but their implementation has been marred by issues with state capacity (Seekings, 2020; Dadap-Cantal et al., 2020).



#### Social protection response/resilience/recovery

#### Humanitarian-social protection linkages

 In some fragile and conflict affected states, humanitarian assistance could be linked to social protection systems, although differences in their approach can make this challenging (Lind et al., 2020; Harvey et al., 2020; Wylde et al., 2020).

#### Preparing for the future

 COVID-19 is likely to remain around and therefore the social protection response needs to consider both immediate needs and building firm foundations for comprehensive social protection systems, with the aim of building back better (Lind et al., 2020).



#### Social protection response/resilience/recovery

#### Long-term response

 Building back better will involve creating links with complementary public goods and services; designing inclusive social protection systems to ensure the inclusion of the most poor and vulnerable; finding ways to adequately finance social protection systems; establishing strong accountability mechanisms; and building administrative capacity (Lind et al., 2020; Tirivayi et al., 2020; ILO, 2020b, 2020c).

#### Aim for universal social protection

• In the long term, universal social protection would offer the opportunity to protect people against the impact of containment measures of a possible resurgence of COVID-19 and future pandemics (Lind et al., 2020; ILO, 2020b, 2020c; World Bank, 2020b).

# SOCIAL IMPACTS OF COVID-19 IN LOW- & MIDDLE-INCOME COUNTRIES

## MARGINALISED VOICES NOT HEARD

The spaces in which marginalised groups can be heard are being closed





#### Closing civic space

- The public health threat posed by COVID-19 has effectively encouraged a further closure of civic space, especially by governments already inclined to limit it (Barendsen et al., 2020; Brechenmacher et al., 2020).
- Lockdowns and physical distancing measures have affected people's ability to meet, organise, and advocate, and civil society organisations are struggling to survive, having lost important sources of funding (Brechenmacher et al., 2020).



#### Human rights violations and politically driven agendas

- Some emergency laws and responses to the pandemic have not been proportionate and compliant with human rights standards (Barendsen et al., 2020; Youngs & Panchulidze, 2020; Edgell et al., 2020).
- There is a concern that some governments are using the pandemic as a pretext to push their own political agendas and adopt repressive measures, particularly around women's rights and sexual and reproductive health, and to silence their opponents (Barendsen et al., 2020; UN, 2020a; Skinner, 2020; Youngs & Panchulidze, 2020; Bachelet, 2020).

#### Stigmatisation and deliberate marginalisation

 The responses of some governments have caused stigmatisation, and in some cases deliberate marginalisation, of certain groups, including LGBTQ people and other minorities, especially religious and ethnic minorities (UNAIDS, 2020; Edgell et al., 2020; Youngs & Panchulidze, 2020).



#### Limiting of transparency and accountability

 COVID-19 has disrupted the regular functioning of state institutions and the way in which they interact with people, which has contributed to limiting transparency and accountability (UNDESA, 2020c).

#### Limiting of access to information

- Some government actions have limited access to information (either unintentionally or deliberately), while others have engaged in disinformation campaigns (Barendsen et al., 2020; Article 19, 2020; UNDESA, 2020c).
- Certain groups, including women and people with disabilities, are disadvantaged by various barriers in terms of accessing information (UN Women, 2020c; Goyal et al., 2020).



#### Increased digital surveillance

 There are concerns about increasing digital surveillance in the response, which may be used to constrain civic space (Barendsen et al., 2020; Youngs & Panchulidze, 2020).

#### **Opportunities for corruption**

 Emergency responses and economic stimulus packages create greater opportunities for fraud and corruption due to the bypassing of accountability and oversight procedures (UNDESA, 2020c; Youngs & Panchulidze, 2020).



#### **Opportunities for civil society**

- The pandemic has also created new opportunities for civil society, with new forms of protest and activism, and the provision of assistance to communities where the official response has not adequately met people's needs (Barendsen et al., 2020; Youngs & Panchulidze, 2020; Brechenmacher et al., 2020).
- This could strengthen their legitimacy and counter negative narratives spread by some governments about civil society organisations' lack of local accountability and authenticity (Brechenmacher et al., 2020).



## Preparedness, response/mitigation, resilience and recovery measures

- Ensure transparency through the active provision and communication of information and take steps to counter false information (UNDESA, 2020c).
- Challenge restrictions on access to information (UNDESA, 2020c; UNAIDS, 2020; Barendsen et al., 2020).
- Use legislative and judicial oversight, internal and external auditors, and civil society to mitigate the opportunities for corruption in the COVID-19 response (UNDESA, 2020c; UNAIDS, 2020).
- Ensure affected populations receive relevant and timely information; participate in decisions that affect their lives; and have access to trusted feedback mechanisms, to ensure the COVID-19 response is accountable to them (UNICEF, 2020a; UNHCR, 2020).
- Adapt opportunities for participation, engagement, and representation (UNDESA, 2020c; UNAIDS, 2020).
- Provide support to strengthen civil society (Brechenmacher et al., 2020).



#### Overall summary of recommended responses

Overall, the literature reviewed suggests that responses to the COVID-19 pandemic should:

- Analyse who is marginalised and at risk from the different impacts
  of the COVID-19 pandemic and make protection of the lives and
  livelihoods of the most vulnerable a priority (UNFPA, 2020; HI, 2020;
  UN, 2020d; World Bank, 2020b; Cochran et al., 2020).
- Collect, analyse and monitor disaggregated data (UNFPA, 2020; HI, 2020; Haegeman & Vlahakis, 2020).
- Ensure responses are human-rights based and inclusive of those most affected, including their representation in the decisionmaking, governance, and monitoring of the response (UN, 2020b; HI, 2020; UNAIDS, 2020; Rafaeli & Hutchinson, 2020; Haegeman & Vlahakis, 2020; Fuhrman & Rhodes, 2020; Freizer, 2020; De Hoop et al., 2020; UNDESA, 2020c).
- Combat stigmatisation and marginalisation in the response (UNAIDS, 2020).



#### Overall recommendations summary cont.

- Expand social protection programmes and include previously excluded groups, such as informal workers (Gentilini et al., 2020; Staab et al., 2020; Seekings, 2020; Dadap-Cantal et al., 2020).
- Maintain essential food, violence prevention, and health services, including sexual and reproductive health services, and provide support to cover financial obligations for things like basic utilities and rent (UN, 2020d; Cochran et al., 2020; Staab et al., 2020; Nazneen and Araujo, 2020; UN Women, 2020b; UNFPA, 2020; Klugman, 2020; Hazard, 2020; SHRH, 2020; Leung et al., 2020; Church et al., 2020).
- Promote flexible work arrangements, the provision of care, and sharing of unpaid care and domestic work, to reduce women's unpaid care burden (Cochran et al., 2020; Staab et al. 2020).
- In the long-term, universal social protection and protection of health, economic, and social rights are critical in mitigating the impacts of global pandemics and their fallout (Lind et al., 2020; ILO, 2020b, 2020c; World Bank, 2020b; UNAIDS, 2020; UN, 2020a).



#### MARGINALISED VOICES NOT HEARD

The spaces in which marginalised groups can be heard are being closed



#### NO SOCIAL PROTECTION

SOCIAL IMPACTS OF COVID-19 shocks

SOCIAL IMPACTS OF COVID-19 shocks

SOCIAL IMPACTS OF COVID-19 shocks

IN LOW- & MIDDLE-INCOME COUNTRIES

In Afri

In Africa, 80% aren't covered



LACK OF DATA EXACERBATING EXCLUSION

Lack of disaggregated data contributes to further the exclusion of those most affected



Informal workers

People with disabilities

LGBTQI people

Children

Forcibly displaced

persons

Migrants

Young people

#### MARGINALISED GROUPS MOST AFFECTED

Existing inequalities have been exposed and worsened by COVID-19



#### POOR AND NEAR POOR AT RISK OF EXTREME POVERTY

Up to 395 million more will fall into extreme poverty in 2020



WOMEN & GIRLS MOST AFFECTED

COVID-19 has the potential to reverse decades of progress in their development and rights

#### RECOMMENDED RESPONSES

- Analyse who is marginalised and at risk of the different impacts of the COVID-19 pandemic and make protection of the lives and livelihoods of the most vulnerable a priority
- Collect, analyse and monitor disaggregated data

- Ensure responses are human-rights based and inclusive of those most affected, including their participation in the decision-making, governance and monitoring of the response
- Reduce women's unpaid care burden
  by promoting flexible work arrangements, the provision of care,
  and sharing of unpaid care and domestic work
- Expand social protection programmes and include previously excluded groups, such as informal workers
- Combat stigmatisation
   and marginalisation in the response
- Maintain essential food and health services, including sexual and reproductive health services, and provide support to cover financial obligations for things like basic utilities and rent

In the long-term, universal social protection and protection of health, economic, and social rights are the best defence against global pandemics and their fallout.

For more information see: Rohwerder, B. (2020). Social impacts and responses related to COVID-19 in low- and middle-income countries. K4D Emerging Issues Report. Brighton, UK: Institute of Development Studies.





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